DOCUMENT RESUME

ED 341 007 CG 023 964

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TITLE Assessing AIDS Awareness among Students of a Regional Public Institution.
PUB DATE 91
NOTE 8p.
PUB TYPE Reports - Research/Technical (143)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Acquired Immune Deficiency Syndrome; *At Risk Persons; College Students; Commuting Students; Higher Education; *Knowledge Level; Nurses; Student Attitudes

ABSTRACT

Acquired Immune Deficiency Syndrome (AIDS) could be a leading cause of death in American youth before the end of this century. Awareness is the starting point in preventing the spread of the AIDS epidemic. Infection from Human Immunodeficiency Virus (HIV) is absolutely preventable if people are aware of the potential for becoming infected and act accordingly. This project was born out of the desire to assess one student population's level of awareness regarding AIDS, and to direct the institution's efforts in this student populations' understanding of AIDS. The project was conducted at a regional state higher education institution of 2,800 (mostly commuter) students. Survey questions fell into four categories: how AIDS is contracted; how AIDS affects individuals and groups; how to protect oneself from AIDS; and general information regarding AIDS. The Nursing Division was expected to score higher than other divisions due to the nature of the curriculum. Nursing students outscored all other divisions within the college. A relationship was found between age and the AIDS knowledge score. Younger students had lower scores than older students, which reflects less knowledge of AIDS. The higher scores of older students possibly reflect more of a concern for the future of a younger generation of students. (LLL)

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ASSESSING AIDS AWARENESS AMONG STUDENTS OF A REGIONAL PUBLIC INSTITUTION

by

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INTRODUCTION

AIDS or Acquired Immunodeficiency Syndrome could be a leading cause of death in American youth before the end of this century. A high level of sexual activity coupled with the tendency to underestimate the risk of such activity, places traditional age college students at risk with respect to AIDS. The American College Health Association in their General Response On Institutional Response to AIDS (1988) notes that "communities of higher education must respond effectively to the epidemic of HIV infection. In a campus environment many students are faced with new independence, self-determination, and a strong sense of peer pressure to adopt certain behaviors." Reinisch (1991) found in a survey of Indiana University students that sexual activity was at a high level in the population sampled and that 50% of the male respondents and 36% of the females had sex with someone they had just met. Their report further notes that "many people in campus communities believe HIV infection and AIDS are problems faced elsewhere." Herting (1988) found that only one-third of the college students surveyed had made a noted change in their sexual behavior as a result of the AIDS epidemic. Such attitudes and behaviors are problematic when one considers that having sex with someone is like having sex with every partner they have had since 1977 (Planned Parenthood 1977). The prolonged latency between HIV infection and the development of AIDS, no doubt, contributes to college students underestimating the danger to themselves.

AIDS is increasing in the United States despite a multitude of medical research efforts designed to halt its spread. Like many other diseases associated with the social behaviors of a society the best hopes of a cure for AIDS, at present, lie in not contracting it in the first place. A study of Catonsville Community College students in Maryland (1989) indicated that although students indicated a desire for more AIDS information as their top priority, their perceived vulnerability to the AIDS virus was far below that desire. It is of utmost importance that those populations who are at risk for contracting this disease receive clear concise information regarding the nature of this disease and how it can be prevented.

Awareness is the starting point in preventing the spread of the AIDS epidemic. Infection from the HIV virus is absolutely preventable if people are aware of the potential for becoming infected and act accordingly. If the campus population is aware of the risk of infection and the means of prevention then at least one critical prerequisite is met for a change in behavior which can reduce the risk of contracting AIDS. The initial step in this educational process, like all educational processes, is to assess the current level of awareness before educational programs are designed to heighten awareness.

This project was born out of the desire to assess one student population's level of awareness regarding AIDS and to direct the institution's efforts in this student populations' understanding of AIDS. The project was conducted

at a regional state institution of 2,800 students. The institution enrolls students in two-year vocational programs as well as Bachelors degree students in the arts, sciences, and professional studies area. The student population is largely commuter with an average age of 33. Most are first generation college students.

OBJECTIVES OF THE STUDY

1. To assess students' knowledge and awareness about AIDS; its transmission and its general effects on individuals and groups.
2. To begin establishing an AIDS knowledge baseline for students attending the college.
3. To determine if any significant knowledge score variation occurred between student subgroups (age, gender, division affiliation, marital status, class, campus, or type of living location).
4. To determine the level of student self-reported need for additional information about AIDS.
5. To assist in determining the need for additional AIDS education among the student population at the college.

METHODOLOGY

The Sample Population

One upper division and one lower division class in each academic division and two core classes in each School of Technology division, were identified as sites to administer the survey and collect the results on campus. Each off-campus extension center director was sent copies of the survey and asked to administer it in two of their extension site classes. This approach resulted in a sample that reflected the age, major, and gender distribution of the campus population.

The Instrument

A twenty question true or false survey, acquired from a professional AIDS training workshop, was modified by the Institution's AIDS task force and used to generate a total AIDS information score (the number of questions correctly answered).

Demographic questions were added related to: Divisional affiliation, class, campus location, age, marital status, type of home location, need for more information, preference for having AIDS information integrated into the curriculum, and type of AIDS education desired.

Survey questions fell into four categories: (a) How AIDS is contracted; (b) How AIDS affects individuals and groups; (c) How to protect oneself from AIDS; and (c) General information regarding AIDS.

Data Analysis

ANOVA (Analysis of variance), Descriptive statistics, and Crosstabs were used to analyze these data.

RESULTS

A total of 515 surveys were returned and included in the data analysis. The mean score of all respondents was 18.86 with a range of 11 to 20. No significant differences in mean scores were found between groups by gender, class, campus location (distance education sites), marital status, or size of community where respondents spent most of their life (rural community, small town, large city).

Other variables approached significance at the .05 level. The differences in mean scores between males (18.72) and females (18.93) was significant at the .075 level. The difference in scores between married respondents (19.82) and single respondents (18.79) was significant at the .056 level.

Significant mean score differences (.05) were found between educational divisions of the college, between age groups, and between the scores of students who expressed a need for more information about AIDS and those who indicated they did not need additional information about AIDS. The Nursing Division had the highest mean score (19.23). The Office and Business Technology Division had the lowest mean score (18.31) followed by the Technical and Industrial Division (18.47). Statistically significant differences occurred between both Nursing and Office and Business Technology and Nursing and Technical and Industrial Division. Respondents 39 years of age and older had the highest mean score (19.13) followed by the 30 - 39 age group (19.09). Significant differences were found between these two groups and the 25-29 age group (18.67).

The sample was almost evenly split by their expressed need for more AIDS information. At a ratio of nearly 2:1, students indicated they believed AIDS education should be integrated into the curriculum of the various majors offered by the college.

With the exception of the Divisions of Business, Technical and Industrial Division, Language and Literature, and undecided students, the majority of students in other divisions wanted more AIDS information. Interestingly, students in every division, except Technical and Industrial Division and Literature and Language, believe AIDS education should be integrated into the major.

DISCUSSION

The mean score for all respondents, by most measurement standards, is quite high. The score of the 18.86 is in excess of 94% and significant variations by age and division, while statistically significant, is relatively small.

However, the question must be raised as to whether or not a 94% score demonstrates an adequate understanding of AIDS given the severity of the consequences when AIDS is contracted and the small behavioral adjustments required to reduce the risk of contracting the disease.

Although survey reliability and validity were not available, an evaluation of mean scores by various subgroups in the sample raised some interesting issues. While no formal validity information is available, these data do suggest an informal validity. We expect the Nursing Division to score higher than other divisions due to the nature of the curriculum. Indeed as an educational division, nursing students outscored all other divisions within the college. Secondly, we note that students who indicated a need for more AIDS information have statistically significantly lower scores than those students indicating no further need for AIDS information.

The apparent relationship between age and AIDS knowledge score is both interesting and of concern. Younger students had lower scores than older students. It makes sense that students' knowledge of AIDS should be greatest when they are apt to be more experimental with respect to their lifestyle. The higher scores of older students possibly reflect more of a concern for the future of a younger generation of students. In the case of students at the institution under consideration, the greater knowledge as manifested in higher scores, might reflect concern for their immediate families (since the students are largely non-traditional in age.)

This analysis would suggest that potential target groups for AIDS education include younger students, single students and students in the School of Technology. Certainly the infusion of AIDS information in all curricular areas, as suggested by two-thirds of the respondents, would address the lack of AIDS knowledge that seems to be present in these target populations.

RECOMMENDATIONS

1. Replicate this assessment using the same instrument with additional analysis of the instrument included. Assuming that 94% is not acceptable, we need to determine specific points of misinformation held by students who took the survey. A question by question analysis of the AIDS information "test" would extend our understanding of those missed questions as well as provide us with continued baseline data to compare with information already collected. In addition, the reliability and validity of the instrument needs to be addressed.
2. A curriculum audit should be conducted regarding where, how, and when AIDS information is presented.
3. Further data needs to be collected to validate target groups for AIDS education infusion and the means of infusing AIDS education into the curriculum.

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